

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.G.		3/12
O.I.P.E. CLASSIFIER		59	431
FORMALITY REVIEW	S.H. SK	1085 809	2/28/01 8-20-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	3/12/02
2	✓	✓	3/12/02
3	✓	✓	3/12/02
4	✓	✓	3/12/02
5	✓	✓	3/12/02
6	✓	✓	3/12/02
7	✓	✓	3/12/02
8	✓	✓	3/12/02
9	✓	✓	3/12/02
10	✓	✓	3/12/02
11	✓	✓	3/12/02
12	✓	✓	3/12/02
13	✓	✓	3/12/02
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If more than 150 claims or 10 actions  
 staple additional sheet here

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